

The Positive Youth Project

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Rationale

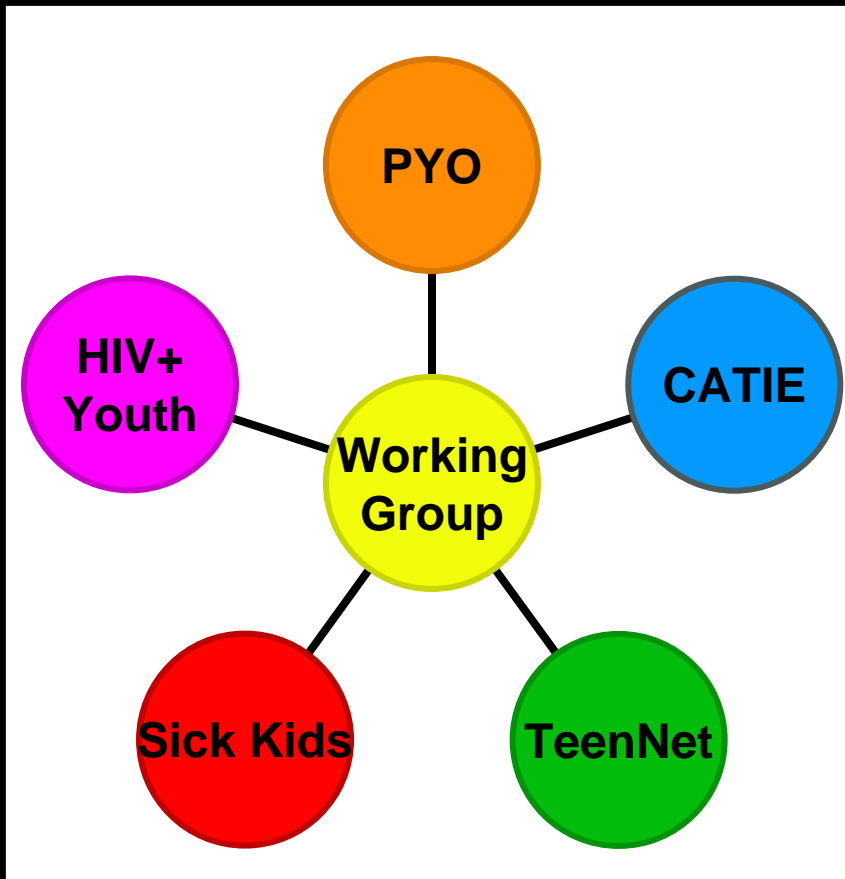
There is a profound lack of resources for Canadian HIV-positive youth and their families.

Partnerships between positive youth-, health- and community-based practitioners and academics are desperately needed to help address this need.

The Positive Youth Project is a collaborative initiative to address this need.

Our goal is to improve the health of youth infected and affected by HIV through the creation of youth friendly, accessible resources.

Working Together



Partners that sit on the Advisory Committee include: YouthCO, Canadian AIDS Society, Canadian Aboriginal AIDS Network, AIDS Community Care Montreal, Pauktuutit/Canadian Inuit HIV/AIDS Network, the Canadian Aboriginal AIDS Network, the Ontario AIDS Network and the electronic Child Health Network.

- **Youth living with HIV** involved as co-researchers in all aspects of this project.
- **Positive Youth Outreach (PYO)** is run by HIV+ youth, and provides peer support, education and advocacy services to youth living with HIV/AIDS in the GTA. PYO will bring expertise in service delivery for HIV-positive youth.
- **The Hospital for Sick Children** is a state-of-the-art academic health sciences centre that specializes in the treatment of children and adolescents. The divisions of **Adolescent Medicine** and **Infectious Diseases** will provide medical and research expertise.
- **Canadian AIDS Treatment Information Exchange (CATIE)** is Canada's leading source of treatment information for Canadians living with HIV/AIDS and their caregivers. CATIE will contribute skills in developing and providing HIV/AIDS treatment information for consumers and dissemination vehicles.
- **The TeenNet Project** generates knowledge and develops practical tools for engaging youth in health promotion using technology. TeenNet will contribute extensive youth research expertise and experience in online resource development.

Objectives

- ***Understanding***: Explore the barriers and supports needed for Canadian HIV-positive youth to achieve their goals.
- ***Improve Health Behavior & Care***: Investigate the self-care behaviors of HIV-positive youth and relevant supports and barriers.
- ***Engagement***: Develop protocols for working in a participatory fashion with HIV-positive youth and best practice guidelines for using technology to disseminate information to this marginalized population.
- ***Create policy guidelines***: Investigate resource, programming, clinical and policy guidelines to support Canadian HIV-positive youth achieve their goals (including self-care).
- **Address the voiced needs of youth**

Project Summary

Mobilize Advisory Group & Establish Working Group.

Establish Working Group & Collaboratively Develop Protocol

Conduct key informant interviews with Ontario HIV+ youth

Working Group Collaboratively Analyze Data

Host Youth Roundtable for Action

Further proposal development

**Next Steps: Developing Interactive Website , Training Workshops,
Reinvigorating a national network**



Defining Communities and Choosing Partners

Presentation prepared

by Kirsten Senturia

for CBPR Institute 2005

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Partners

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•Understanding DV in Nine Ethnic Communities

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Seattle Indian Health Board
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•DV Social Support Groups

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DV in Nine Ethnic Communities

Description of the project

- Qualitative descriptive CBPR using focus groups and individual interviews
- Assessment of cultural context of DV, access to, and satisfaction with, DV services among ethnic and LGBT survivors of DV
- Cultural communities: African American, Amharic-speaking, Cambodian, Filipina, Latina, LGBT, American Indian/Alaskan Native (AI/AN), Russian-speaking, Vietnamese
- Funded by National Institutes of Justice

Origin of the project

- Idea came from Seattle Domestic Violence Council
- Initial plan was to gather prevalence data via telephone survey
- Stakeholders demanded addressing issues for marginalized communities *first*
- Decided to conduct focus groups to better understand DV experience

DV in Nine Ethnic Communities

Process of deciding on target communities and partners

- Initial grant proposal to NIJ: African-Americans, Asian-Americans, Latinas, AI/AN
- Additional funding through the city for more groups
- Stakeholder meeting of Seattle DVC to decide on additional groups
- Consideration of ethnicity, disability, marginalized groups (incarcerated women)
- **Balance of stakeholder interests, population numbers, research constraints**
- **Solicitation of interested stakeholders & commitment to collaborate**

Social Support Groups for DV Survivors

Description of the project

- Idea developed from previous NIJ-funded project on DV and access to services
- Pilot project to test feasibility of intervention in refugee and immigrant communities
- Social support and skill-building groups
- Cultural communities: Cambodian, Ethiopian, Russian-speaking and Somali
- Funded by CDC through Seattle's Urban Research Center grant

Social Support Groups for DV Survivors

Origin of the project

- Follow-up to NIJ funded project: met with partners to assess interest in continuing
- Solicited funding through Seattle Partners/CDC

Social Support Groups for DV Survivors

Process of deciding on partners and choosing communities

- ReWA emerged as interested and capable partner; PHSKC & ReWA decide to collaborate
- Initial conversations between researchers and ReWA staff of which communities to follow up with
- Based on earlier research--wanted to include some of those groups
- Value in adding new cultural groups
- Balance of larger and smaller population groups
- Consideration of ReWA staff availability and expertise for particular groups

For more information:

- Initial NIJ funded research report
Cultural Issues Affecting Domestic Violence Service Utilization in Ethnic and Hard to Reach Populations

<http://www.metrokc.gov/health/dv/dvreport.htm>

- Current project

We can help each other: Domestic Violence Intervention

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- Seattle Partners for Healthy Communities

<http://depts.washington.edu/hprc/SeattlePartners/>